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Bib Data Sheet

CONFIRMATION NO. 5944

SERIAL NUMBER 09/840,817	FILING DATE 04/24/2001 RULE	CLASS 348	GROUP ART UNIT 2614	ATTORNEY DOCKET NO. US 010028
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APPLICANTS

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** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE
GRANTED ** 06/14/2001

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NY	SHEETS DRAWING 4	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 5
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature 	Initials		

ADDRESS

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TITLE

3-D Recursive vector estimation for video enhancement

FILING FEE RECEIVED 870	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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